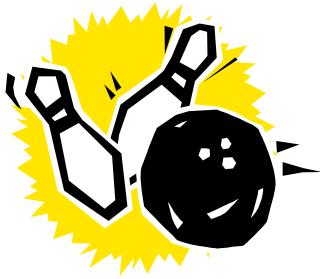


Eat lunch at church, Return by 5:00pm

Tuesday, November 13



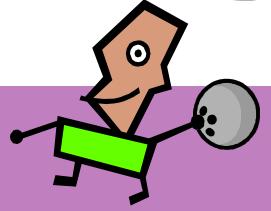
~ Bring: lunch and \$8.00 with this permission slip The fee covers gas, two games and DQ snack in East Wenatchee.

~ Same age friends are welcome but they must have a copy of this release. Notify Pastor Andy by Sunday, Nov. 5 to get a seat on the bus.

~ Bus will pick up kids after school in the 7th day Adventist parking lot and take them to Kid Krazy to eat their sack lunch—then return them to Kid Krazy for pick up.

rap bowling

A 5th and 6th Grade Only Event



Release of Liability (Bring this half)

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone# Day _____ Evening _____ Emergency _____

Activity: Bowling Dates: 11/13/06

Location: Eastmont Lanes & DQ

The undersigned represents to Christ Center, that he/she is the natural parent or the legal guardian of the above named child; and the undersigned does hereby consent to such minor taking part in noted activity with full understanding insofar as such activity will involve but not limited to the following: an entertainment activity, overnight stay and church service involving mingling with other individuals and groups, that there is always the risk of injury, illness, loss and possible consequent expense for medical diagnostic and curative treatments, and incidental loss and expense, and the undersigned does for him/herself and for and on behalf of such minor assume the risk of such expense, and does hereby wholly release Christ Center from any responsibility or liability; and waives any claims or causes of action against him that might arise on account of loss, injury or expense occasioned by any sort of accident or any other circumstance involving such child, and agrees to hold harmless Christ Center in event any such claim should arise; and the undersigned agrees to abide by the rules and regulations, supervision and discipline set and applied by Christ Center to arrange for and consent to x-ray examinations, anesthetic, dental, medical or surgical diagnosis, and treatment, and hold harmless Christ Center from any such. The undersigned will furnish payment or insurance for any such payment, at his or her own expense. Furthermore I give Christ Center permission to administer first aid should the need arise.

AUTHORIZATION

I/We give permission for my son/daughter to attend above Christ Center Church function. I/We have read the above release of liability and agree to its provisions.

Signature: _____ Date: _____

Relationship to minor: _____

If you need any further information please call Andy at 782-2825 x203 or 293-2203. A copy of this release must accompany the student.